PTO/SB/22 (09-06)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional)				
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			00131-00350-US				
Application Number 10/673,000-Conf. #9773			Filed September 26, 2003				
For USE OF HYDROSTATIC PRESSURE TO INHIBIT AND REVERSE PROTEIN AGGREGATION AND FACILITATE PROTEIN REFOLDING							
Art Unit 163	9		Examiner	M. C. T. Tran			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.							
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):							
		<u>Fee</u>	Small Entity Fee				
x One i	month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 60.00			
Two i	months (37 CFR 1.17(a)(2))	\$450	\$225	\$			
Three	e months (37 CFR 1.17(a)(3))	\$1020	\$510	\$			
Four	months (37 CFR 1.17(a)(4))	\$1590	\$795	\$			
Five	months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$			
X Applicant of	claims small entity status. See 37 CF	R 1.27.					
A check in the amount of the fee is enclosed.							
Payment by credit card. Form PTO-2038 is attached.							
The Director has already been authorized to charge fees in this application to a Deposit Account.							
The Director has already been authorized to charge any fees which may be required, or credit any overpayment, to							
Deposit Account Number 03-2775 I have enclosed a duplicate copy of this sheet.							
I am the	applicant/inventor.						
	assignee of record of the entire	interest. See 37	CFR 3.71.				
<u> </u>	Statement under 37 CFR 3.						
X	attorney or agent of record. Re	gistration Number	40,634				
attorney or agent under 37 CFR 1.34.							
Registration number if acting under 37 CFR 1.34							
Christise M. Hanser			October 30, 2006				
	Registration number if acting under 37 CFR 1.34 Chustine M. Hoursu October 30, 2006 Signature Date						
	Christine M. Hansen		(302)	558-9141			
Typed or printed name			Telephone Number				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
Total of	1 forms are submit	ted.		•			

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PTO/SB/17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. 10/673,000-Conf. #9773 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number September 26, 2003 TRANSMITTAL Filing Date Ann S. Robinson First Named Inventor **For FY 2006** M. C. T. Tran **Examiner Name** 1639 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 00131-00350-US TOTAL AMOUNT OF PAYMENT Attorney Docket No. METHOD OF PAYMENT (check all that apply) Money Order None Other (please identify): Check Credit Card Connolly Bove Lodge & Hutz LLP x Deposit Account Deposit Account Number: 03-2775 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee x Charge fee(s) indicated below Charge any additional fee(s) or underpayments of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES **EXAMINATION FEES FILING FEES Small Entity Small Entity** Small Entity Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) 200 100 300 150 500 250 Utility 130 65 200 100 100 50 Design 80 200 100 300 150 160 Plant Reissue 300 150 500 250 600 300 0 0 0 200 100 0 Provisional Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues) Multiple dependent claims 360 180 Multiple Dependent Claims **Total Claims** Extra Claims Fee Paid (\$) Fee (\$) Fee Paid (\$) _ - 38 = Fee (\$) HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Indep. Claims Extra Claims _ -6= HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Number of each additional 50 or fraction thereof Fee (\$) Extra Sheets ____ (round up to a whole number) x - 100 = /50 Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) 60.00 Other (e.g., late filing surcharge): 2251 Extension for response within first month

SUBMITTED BY						
Signature	Christie M. Hanse	Registration No. (Attorney/Agent)	40,634	Telephone	(302) 658-9141	
Name (Print/Type)	Christine M. Hansen			Date	October 30, 2006	